



Advanced Airway Skills Workshop

Virginia Office of E.M.S.
2011 EMS Symposium
Course: PRE-019





Why are you here????

To be able to recognize the difficult airway and to develop a rescue plan for difficult airway management



This is why are you here!!!





...and this





...and this





...and this





Objectives

What this is not....

A certification course.

What this is...

An introduction to various procedures and equipment that will allow you to manage the difficult airway. These are the blueprints and tools.



Objectives

What this is not....

Authorization to perform these skills or use these pieces of equipment.

What this is...

Ideas and processes to take back to your agency and Operational Medical Director (OMD).

Only your O.M.D. can authorize you to perform any of these procedures under their guidance and direction.



Objectives

What this is not....

An endorsement for any one product or manufacturer.

What this is...

An opportunity to have hands-on training with the equipment.

An opportunity to interact with professionals who have years of experience and training as well as teaching the difficult airway.



The Goal

***To obtain the best possible
airway to meet the patient's
needs.....***

Ventilate and Oxygenate



The Strategy

Prepare

Plan

Just Do It

Evaluate

Evaluate

Evaluate

Evaluate



Prepare

1. *Mentally – every patient, every time*
2. *Physically – environment / comfort*
3. *Guidelines – what guides you*
4. *Practice, Practice, Practice – need I say more!*



Plan

*Advance Airway Procedures only come before
Basic Life Support*

..... In the dictionary!!!



Plan

*Everything I learned as
a Paramedic,*

I learned as an E.M.T.



Plan

Paramedics save lives.....

.... and EMTs save Paramedics!!!



Tactics

BASIC LIFE SUPPORT



Your best friend

You **MUST** be proficient

Adjuncts (oral/nasal airways)

Commit to this first and

assign adequate resources



Plan

BASIC LIFE SUPPORT



***Don't Forget
Me!!!***



Tactics

ADVANCED LIFE SUPPORT

***Don't Be Impatient
we're getting to that!!!***



Tactics



Tab A



Slot B



Happy
O.M.D.



JUST DO IT

Equipment – prepared, readied

Pre-oxygenate – the patient

Suction – as needed

Get-R-Done!



Evaluate

Every time you intubate you must:

- 1. Visualize - tube through the cords**
- 2. Chest Excursion – rise and fall**
- 3. Auscultate – bilateral equal breath sounds**
- 4. Lack of Epigastric Sounds**
- 5. Clinical Improvement – color, LOC**
- 6. End-Tidal CO₂**
- 7. Pulse Oximetry**



Evaluate

Every time you intubate you must:

Secure that tube and record depth





Re-Evaluate

Every time you move the patient and every 5 minutes you must:

- 1. Chest Excursion – rise and fall**
- 2. Auscultate – bilateral equal breath sounds**
- 3. Lack of Epigastric Sounds**
- 4. Clinical Improvement – color, LOC**
- 5. End-Tidal CO₂**
- 6. Pulse Oximetry**



TACTICS

Station 1 – Video Laryngoscope

John Sayers, Robert Trimmer
and Donnie Hall

Station 2 – Surgical Cricothyrotomy

Greg Jones and Bill Slack

Station 3 – Intubation of the Difficult Airway

Tim McKay, John Green and
Eddie Ferguson

Station 4 – Capnography

Tom Nevetral





Contacts

Operational Medical Director: Dr. Allen Yee

yeea@chesterfield.gov

(804) 751-2359

EMS Captain: Al Thompson

thompsona@chesterfield.gov

(804) 717-6894

RSI Program: John Green

greenj@chesterfield.gov

(804) 743-2232